PART B - FEE(S) TRANSMITTAL

JAN 2	9 2008	her with applicabl	or <u>Fax</u>	Commissioner for P.O. Box 1450 Alexandria, Virg (571)-273-2885	or Paten ginia 223	313-1450	**
NSTRUCTIONS: This for ppropriate. All carther condicated unless compared naintenance fee not hear	orm should be used prespond for directed of	for transmitting the ISS ng the Patent, advance of nerwise in Block 1, by (	UE FEE and PUBLIC orders and notification (a) specifying a new c	CATION FEE (if requestion of maintenance fees orrespondence address	uired). Blo will be ma s; and/or (b	ocks 1 through 5 shailed to the current b) indicating a sepa	nould be completed where correspondence address as rate "FEE ADDRESS" for
29585 7 DLA PIPER US 153 TOWNSEND SUITE 800		Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.  Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.					
SAN FRANCISC		(Depositor's name)					
							(Signature)
	<del></del>						(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVEN	TOR	ATTORN	EY DOCKET NO.	CONFIRMATION NO.
10/624,670 ITLE OF INVENTION: N	07/21/2003 METASTATIC COLO	N CANCER SPECIFIC I	Yuanhao Li PROMOTER AND US	ES THEREOF	10557	76-0025-101	1674
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE D	UE PREV. PAID ISSU	E FEE T	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$720	\$300	\$0		\$1020	01/29/2008
EXAMINER		ART UNIT	ĊLASS-SUBCLASS				
CHEN, SHIN LIN		1632	424-093200		720.00 DA	V61V/5 18624670	
Change of correspondence address or indication of "Fee Address" (37 R 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, [Fist 1994]  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth ir (A) NAME OF ASSIGN	an assignee is identi 37 CFR 3.11. Comp.	fied below, no assignee	data will appear on th I a substitute for filing	e patent. If an assign			cument has been filed for
Cell Genesy	s, Inc.	South San Francisco, CA					
_		categories (will not be pr				or other private grou	p entity Government
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Change in Entity Status  a. Applicant claims SI  TE: The Issue Fee and Property as shown by the record	MALL ENTITY status	above) . See 37 CFR 1.27.	₩ b. Applicant is no l	onger claiming SMAL	L ENTITY	r status. See 37 CFR	2 1.27(g)(2).
Authorized Signature  TE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in Date  January 29, 2008							
Typed or printed name	James F. H	aley, Jr.		Registration N	0.	27,794	,

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Attorney Docket No. 105576-0025-101 (Cell 136.1)

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